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Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. PATENT APPLICATION FEE DETERMINATION RECORD Application or Docket Number Substitute for Form PTO-875 CLAIMS AS FILED - PART I OTHER THAN OR SMALL ENTITY (Column 1) SMALL ENTITY (Column 2) FOR NUMBER FILED NUMBER EXTRA RATE FEE RATE FEE BASIC FEE (37 CFR 1.16(a)) OR TOTAL CLAIMS (37 CFR 1.16(c)) minus 20 = X S OR INDEPENDENT CLAIMS (37 CFR 1.16(b)) minus 3 = OR MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) OR * If the difference n column 1 is less than zero, enter "0" in column 2. TOTAL OR TOTAL CLAIMS AS AMENDED – PART II OTHER THAN OR (Column 1) (Column 2) (Column 3) SMALL ENTITY SMALL ENTITY CLAIMS HIGHEST REMAINING NUMBER PRESENT RATE ADDI-RATE ADDI-**AFTER** PREVIOUSLY **EXTRA** TIONAL TIONAL AMENDMENT PAID FOR Ш FEE FEE Total ENDMI Minus (37 CFR 1.16(c)) OR Minus X \$ OR ₹ FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL ADD'L FEE OR ADD'L FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST ω REMAINING PRESENT NUMBER RATE ADDI-RATE ADDI-ENDMENT **FXTRA AFTFR PREVIOUSLY** TIONAL TIONAL AMENDMENT PAID FOR FEE FEE Total Minus (37 CFR 1.16(c)) OR Independent (37 CFR 1.16(b)) Minus OR Z FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL ADD'L FEE OR ADD'L FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST O REMAINING PRESENT NUMBER RATE ADDI-RATE ADDI-ENT **AFTER PREVIOUSLY EXTRA** TIONAL TIONAL AMENDMENT PAID FOR FEE FEE Total (37 CFR 1.16(c)) Minus ENDMI = OR Independent (37 CFR 1.16(b)) Minus OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL ADD'L FEE OR ADD'L FEE * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20" *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PATENT APPLICATION FEE DETERMINATION RECOI								Application or Docket Number							
CLAIMS AS FILED - PART I (Column 1) (Column 2)								MALL TYPE	EN	TITY	OR	OTHER SMALL			
TOTAL CLAIMS			18				ſ	RATE FEE		1	RATE	FEE			
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE 355.00		OR	BASIC FEE	710.00			
TOTAL CHARGEABLE CLAIMS			8 minus 20=		·Ø		İ	X\$ 9=		,	OR	X\$18=			
INDEPENDENT CLAIMS			1 mi	nus 3 =	Ø			X40=			OR	X80=			
MU	LTIPLE DEPEN	IDENT CLAIM P	RESENT	-*					+135=		OR	+270=			
* Iİ	the difference	in column 1 is	less than zero, enter "0" in column 2				L	TOTAL			OR	TOTAL	7/0		
CLAIMS AS AMENDED - PART II									L			OTHER	THAN		
		(Column 1)	(Column 2			(Column 3)		SMALL ENTITY		OR	SMALL	ENTITY			
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM	IBER OUSLY	PRESENT EXTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	. 18	Minus	Ğ.	5	=		X\$ 9=			OR	X\$18=			
	Independent	. 9	Minus	***	3	=		X40=			OR	X80=			
		JLTIPLE DEPENDENT CLA		CLAIM		Ī	+135=	1		OR	+270=				
	(a)							TOTAL				TOTAL			
	(Column 1) (Column 2) (Column 3)								ADDIT. FEEADDIT. FEE						
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	HEST HBER OUSLY FOR	PRESENT EXTRA	ſ	RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	. 15	Minus	Ö.	\mathcal{O}	=		X\$ 9=			OR	X\$18=			
	Independent	· B	Minus	***	3	=		X40=			OR	X80=			
	FIRST PRESE	NTATION OF M	JETIPLE DEF	EINDEIN	CLANV			+135=			OR	+270=			
							L ^	TOTA			OR	TOTAL ADDIT. FEE			
		(Column 1)		(Colu	mn 2)	(Column 3)	Î	.0017.1	. L =			ADDIT. FEE			
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI		PRESENT EXTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	.91	Minus		0	= \		XS 9=			OR	XS18=	18		
	Independent	NTATION OF 14	Minus	PENDENT CLAI		[-0]		X40=			OR	X80=0	86		
	THOI PHESE	NIATION OF M	ULTIPLE DEF	TENUEN	CLAIM		f	+135=	1			+270=	\ \frac{1}{2}		
		mn 1 is less than the mber Previously Previously					L	TOTA			OR OR	TOTAL	(C)		
•••	If the "Highest Nu	mber Previously Pa Imber Previously Pa Inber Previously Pa	aid For" IN THI	S SPACE	is less tha	n 3, enter "3."		DDIT. FE		opriate box		ADDIT. FEE lumn 1.			